

New Mexico State University at Grants

Position Request Form

WORK STUDY

(All Requests are subject to approval depending on funding, Administrative approval, and background check if applicable)

Name _____ NMSU email _____

Banner ID _____

Mailing Address _____
City State Zip

Phone Number _____ Date of Birth _____

Highest Degree Received (including HS diploma or GED) _____

Date Degree Received _____
Month Year

Job Function or Title Student Aide

Rehire

Job Duties _____

Start Date _____

End Date _____

Timesheet Org. Code _____

Index # _____

Work Study Award Amount _____

State

Federal

Financial Aid Spec _____

Date _____

Maximum of Hours of Eligibility Per Week _____

Rate of Pay: \$12.65

Work-study Type: Grants Campus

Main Campus

Community needs

BEFORE EMPLOYMENT BEGINS EVERY NEW HIRE MUST SEE HUMAN RESOURCES TO COMPLETE AND SUBMIT:

i-9

W-4

Background check Form

Resume

Supervisor of this position _____ Date _____

Print Supervisors Name _____ Date _____

Business Manager III _____ Date _____

Campus Executive & Academic Officer _____ Date _____

For Office Use Only

Requisition # _____ Date Entered _____